

| REPLY/AMENDMENT FEE TRANSMITTAL | | Attorney Docket No. | 1454.1660 | | |
|--|---|------------------------------------|-------------------------|---------------|--------------|
| | | Application Number | 10/563,941 | | |
| | | Filing Date | January 10, 2006 | | |
| | | First Named Inventor | Elena COSTA | | |
| | | Group Art Unit | 2617 | | |
| AMOUNT ENCLOSED | 0.00 | Examiner Name | AJIBADE AKONAI, OLUMIDE | | |
| FEE CALCULATION (fees effective 10/02/08) | | | | | |
| CLAIMS AS AMENDED | Claims Remaining After Amendment | Highest Number Previously Paid For | Number Extra | Rate | Calculations |
| TOTAL CLAIMS | 12 | - 20 = | 0 | X \$ 52.00 = | \$ 0.00 |
| INDEPENDENT CLAIMS | 4 | - 6 = | 0 | X \$ 220.00 = | 0.00 |
| Since an Official Action set an <u>original</u> due date of _____, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$130)); (2 months (\$490)); (3 months (\$1,110)); (4 months (\$1,730)); (5 months (\$2,350)). | | | | | 0.00 |
| If Notice of Appeal is enclosed, add (\$540.00) | | | | | |
| If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$140.00) | | | | | |
| Information Disclosure Statement (Rule 1.17(p)) (\$180.00) | | | | | |
| Total of above Calculations = | | | | | \$ 0.00 |
| Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28) | | | | | |
| TOTAL FEES DUE = | | | | | \$ 0.00 |
| (1) If entry (1) is less than entry (2), entry (3) is "0". (2) If entry (2) is less than 20, change entry (2) to "20". (4) If entry (4) is less than entry (5), entry (6) is "0". (5) If entry (5) is less than 3, change entry (5) to "3". | | | | | |
| METHOD OF PAYMENT | | | | | |
| <input type="checkbox"/> | Check enclosed as payment. | | | | |
| <input type="checkbox"/> | Charge "TOTAL FEES DUE" to the Deposit Account No. below. | | | | |
| <input checked="" type="checkbox"/> | No payment is enclosed. | | | | |
| GENERAL AUTHORIZATION | | | | | |
| <input checked="" type="checkbox"/> | If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: | | | | |
| Deposit Account No. | | 19-3935 | | | |
| Deposit Account Name | | STAAS & HALSEY LLP | | | |
| <input checked="" type="checkbox"/> | The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application. | | | | |
| SUBMITTED BY: STAAS & HALSEY LLP | | | | | |
| Typed Name | Richard A. Gollhofer | | | Reg. No. | 31,106 |
| Signature |  | | | Date | 10/26/10 |